

ZILKA·KOTABPC
ZILKA, KOTAB & FEECE™95 SOUTH MARKET ST., SUITE 420
SAN JOSE, CA 95113TELEPHONE (408) 971-2573
FAX (408) 971-4660**RECEIVED**
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Date: August 2, 2005	Phone Number	Fax Number
To: Examiner Woo	(571) 273-8300	
From: Kevin J. Zilka		

Docket No.: NAI1P063_01.305.01**App. No: 10/029,591****Total Number of Pages Being Transmitted, Including Cover Sheet: 15****Message:**

Please deliver to Examiner Woo.

Thank you,

Kevin J. Zilka

☐ Original to follow Via Regular Mail ☒ Original will Not be Sent ☐ Original will follow Via Overnight Courier

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ANY OTHER DIFFICULTY, PLEASE PHONE Erica
AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of:

H. Joiner et al.

Application No. 10/029,591

Filed: 12/21/2001

For: SYSTEM, METHOD AND COMPUTER
PROGRAM PRODUCT FOR A NETWORK)
ANALYZER BUSINESS MODEL

Group Art Unit: 3639

Examiner: Woo, Richard
Sukyoan

Atty. Docket No. NAI1P063/
01.305.01

Date: August 2, 2005

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 at facsimile number: (571) 273-8300 on the above date.

Signed:

Erica L. Parlow

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After <u>Amendment</u>	Highest Previously <u>Paid For</u>	Present <u>Extra</u>	<u>SMALL ENTITY</u> <u>RATE FEE</u>	OR	<u>LARGE ENTITY</u> <u>RATE FEE</u>
TOTAL CLAIMS	34 -	29	05	X25 = \$	OR	X50 = \$250
INDEP CLAIMS	06 -	06	00	X100 = \$	OR	X200 = \$0
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$0		\$0
TOTAL				\$		\$250

- ☐ Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action.
- ☒ Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.
- ☐ Enclosed is our Check No. in the amount of \$0.00 to cover the additional claim fee and/or extension of time fees.
- ☒ If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NAI1P063). A copy of this sheet is enclosed for billing purposes.

Respectfully submitted,
Zilka-Kotab, PC

Kevin J. Zilka
Registration No. 41,429

P.O. Box 721120
San Jose, CA 95172-1120
Telephone: (408) 971-2573

(Revised 1/96)

AUG 02 2005

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COPY

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Signed:

Erica L. Farlow
 Erica L. Farlow

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 P.O. Box 1450
 Alexandria, VA 22313-1450

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TOTAL CLAIMS	<u>34</u> -	<u>29</u>	<u>05</u>	X25 = \$	OR	X50 = \$250
INDEP CLAIMS	<u>06</u> -	<u>06</u>	<u>00</u>	X100 = \$	OR	X200 = \$0
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$0		\$0
TOTAL				\$		<u>\$250</u>



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Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.Enclosed is our Check No. in the amount of \$0.00 to cover the additional claim fee and/or extension of time fees.If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NAI1P063). A copy of this sheet is enclosed for billing purposes.

Respectfully submitted,
 Zilka-Kotab, PC

Kevin J. Zilka
 Kevin J. Zilka
 Registration No. 41,429

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 San Jose, CA 95172-1120
 Telephone: (408) 971-2573

(Revised 1/96)

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Signed: _____

Erica L. Farlow

AMENDMENT A

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed July 1, 2005, please enter the following
amendments believed to place the claims in condition for allowance.